Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

|   |  | 10625879                                  |              |                               |                      |                  |               |                   |                        |     |                         |                        |  |
|---|--|---|--------------|-------------------------------|----------------------|------------------|---------------|-------------------|------------------------|-----|-------------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Colum                      |  |   |              |                               |                      | mn 2)            | SMALI<br>TYPE | SMALL ENTITY TYPE |                        |     | OTHER THAN SMALL ENTITY |                        |  |
| TOTAL CLAIMS  |  |   | 14           |                               |                      |                  | RAT           | E                 | FEE                    |     | RATE                    | FEE                    |  |
| FOR   |  |   | NUMBER FILED |                               | NUMBER EXTRA         |                  | BASIC         | FEE               | 375.00                 | OR  | BASIC FEE               | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | 14 minus 20= |                               | *                    | 0                | X\$ 9         | =                 |                        | OR  | X\$18=                  |                        |  |
| INDEPENDENT CLAIMS  |  |   | 2 minus 3 =  |                               | * 0                  |                  | X42           |                   |                        | OR  | X84=                    |                        |  |
| ΜL  | ILTIPLE DEPEN  | DENT CLAIM P                              | RESENT       |                               | <u> </u>             |                  |               |                   |                        |     |                         |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in |  |   |              |                               | "0" in c             | olumn 2          | +140          |                   |                        | OR  | +280=                   | 7.00                   |  |
| CLAIMS AS AMENDED - PART II                                     |  |   |              |                               |                      | ,                | TOTA          | \L                |                        | OR  | TOTAL                   | 750                    |  |
| (Column 1)  |  |   | (Column 2)   |                               |                      | (Column 3)       | SMALL ENTITY  |                   |                        | OR  | OTHER THAN SMALL ENTITY |                        |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | EST<br>BER<br>DUSLY  | PRESENT<br>EXTRA | RAT           | E                 | ADDI-<br>TIONAL<br>FEE |     | RATE                    | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus        | **                            |                      | =                | X\$ 9         | -                 |                        | OR  | X\$18=                  |                        |  |
|   | Independent  | *   | Minus        | ***                           |                      | =                | X42           |                   |                        | OR  | X84=                    |                        |  |
| L   | FIRST PRESE  | NTATION OF M                              | ULTIPLE DEP  | PENDENT                       | CLAIM                |                  | +140          | _                 |                        | OR  | +280=                   |                        |  |
|   |  |   |              |                               |                      |                  | TO            |                   |                        |     | TOTAL                   |                        |  |
| (Column 1) (Column 2) (Column 3)                                |  |   |              |                               |                      |                  |               | EE                | <u></u>                | Ort | ADDIT. FEE              |                        |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>OUSLY | PRESENT<br>EXTRA | RAT           | Ξ                 | ADDI-<br>TIONAL<br>FEE |     | RATE                    | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus        | **                            |                      | =                | X\$ 9         | =                 |                        | OR  | X\$18=                  |                        |  |
| AME   | Independent  | *   | Minus        | ***                           | - 01 4114            | =                | X42           | =                 |                        | OR  | X84=                    |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                  |  |   |              |                               |                      |                  | +140          | =                 |                        | OR  | +280=                   |                        |  |
|   |  |   |              |                               |                      |                  |               | FEE.              |                        | OR  | TOTAL<br>ADDIT. FEE     |                        |  |
|   |  | (Column 1)                                |              | (Colu                         |                      | (Column 3)       |               |                   |                        |     |                         |                        |  |
| AMENDMENT C   | 13.24  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY         | PRESENT<br>EXTRA | RATI          | ≣                 | ADDI-<br>TIONAL<br>FEE |     | RATE                    | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus        | **                            |                      | =                | X\$ 9         | =                 |                        | OR  | X\$18=                  |                        |  |
| ME  | Independent  | *   | Minus        | ***                           |                      | =                | X42:          |                   |                        |     | X84=                    |                        |  |
| Ľ   | FIRST PRESE  | NTATION OF M                              | ULTIPLE DEF  | PENDEN.                       | T CLAIM              |                  |               |                   |                        | OR  |                         |                        |  |
| *   | If the entry in colu   | +140                                      |              |                               | OR                   | +280=            |               |                   |                        |     |                         |                        |  |
| **  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                               |                      |                  |               |                   |                        |     |                         |                        |  |